MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.								
1	✓							51						
2		✓						52						
3		✓						53						
4		✓						54						
5		✓						55						
6		✓						56						
7		✓						57						
8		✓						58						
9		✓						59						
10		✓						60						
11		✓						61						
12		✓						62						
13		✓						63						
14		✓						64						
15		✓						65						
16		✓						66						
17		✓						67						
18		✓						68						
19		✓						69						
20		✓						70						
21		✓						71						
22		✓						72						
23	✓							73						
24	✓							74						
25	✓							75						
26	✓							76						
27								77						
28								78						
29								79						
30								80						
31								81						
32								82						
33								83						
34								84						
35								85						
36								86						
37								87						
38								88						
39								89						
40								90						
41								91						
42								92						
43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.								TOTAL IND.						
TOTAL DEP.	21							TOTAL DEP.						
TOTAL CLAIMS	26							TOTAL CLAIMS						

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS